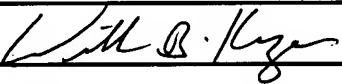
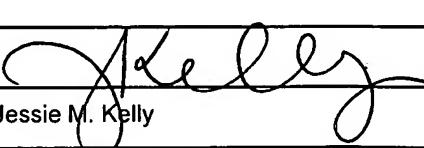


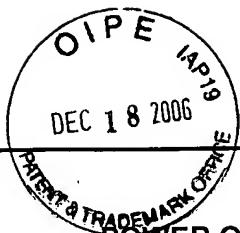
SFW 1626

<p style="text-align: center;">TRANSMITTAL FORM</p> <p>DEC 18 2006</p> <p>(to be used for all correspondence after initial filing)</p>		Application Number	10/537,115
		Filing Date	March 20, 2006
		First Named Inventor	Aleksandr Kolesnikov
		Art Unit	1626
		Examiner Name	To be assigned
Total Number of Pages in This Submission	3	Attorney Docket Number	016002-004310US

ENCLOSURES (Check all that apply)					
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input checked="" type="checkbox"/> After Allowance Communication to TC			
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences			
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)			
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information			
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter			
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):			
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Statement Under 37 CFR 3.73(b) and a Return Postcard			
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> Landscape Table on CD			
<input type="checkbox"/> Certified Copy of Priority Document(s)	<table border="1" style="width: 100%;"> <tr> <td style="width: 10%;">Remarks</td> <td>The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.</td> </tr> </table>			Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.
Remarks	The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.				
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<table border="1" style="width: 100%;"> <tr> <td style="width: 10%;"><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53</td> <td></td> </tr> </table>			<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53					

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature			
Printed name	William B. Kezer		
Date	12-15-06	Reg. No.	37,369

CERTIFICATE OF TRANSMISSION/MAILING			
<p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.</p>			
Signature			
Typed or printed name	Jessie M. Kelly	Date	12-15-06



~~TRADEMA~~
POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM

Application Number	10/537,115
Filing Date	March 20, 2006
First Named Inventor	Aleksandr Kolesnikov
Title	2-(2-Hydroxybiphenyl-3-yl)-1h-benzoimidazole-5- carboxamidine derivatives as factor viia inhibitors
Art Unit	1626
Examiner Name	To be assigned
Attorney Docket Number	016002-004310US

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

Practitioners associated with the Customer Number:

20350

OR

Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

The address associated with the above-mentioned Customer Number:

OR

The address associated with Customer Number:

20350

OR

Firm or
Individual Name

Address

City

I am the:
□

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Richard Miller</i>	Date 10/10/2006
Name	<u>RICHARD A. MILLER, M.D.</u>	Telephone 408 774-0330
Title and Company	Pharmacyclics, Inc	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of _____ forms are submitted.

**STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner: Aleksandr Kolesnikov, et al.Application No./Patent No./Control No.: 10/537,115 Filed/Issue Date: March 20, 2006Entitled: 2-(2-Hydroxybiphenyl-3-yl)-1h-benzoimidazole-5- carboxamidine derivatives as factor viia inhibitors

Pharmacyclics, Inc., a Corporation
(Name of Assignee) (Type of Assignee: corporation, partnership, university, government agency, etc.)

states that it is:

1. the assignee of the entire right, title, and interest; or
2. an assignee of less than the entire right, title and interest.
(The extent (by percentage) of its ownership interest is _____ %)

in the patent application/patent identified above by virtue of either:

A. An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame ____, or for which a copy thereof is attached.

OR

B. A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as follows:

1. From: Aleksandr Kolesnikov; Roopa Rai, William Dvorak Shrader; Steven M. Torkelson; Kieron E. Wesson and Wendy B. Young To :Axys Pharmaceuticals, Inc.
The document was recorded in the United States Patent and Trademark Office at Reel 016923, Frame 0724, or for which a copy thereof is attached.

2. From: Axys Pharmaceuticals, Inc. To :Pharmacyclics, Inc.
The document was recorded in the United States Patent and Trademark Office at Reel 017855, Frame 0717, or for which a copy thereof is attached.

3. From: _____ To :
The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached.

Additional documents in the chain of title are listed on a supplemental sheet.

As required by 37 CFR 3.73(b)(1)(i), the documentary evidence of the chain of title from the original owner to the assignee was, or concurrently is being, submitted for recordation pursuant to 37 CFR 3.11.

[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, to record the assignment in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Richard Miller

Signature

10/10/2006

Date

RICHARD A. MILLER, M.D.

Printed or Typed Name

408 774-0330

Telephone Number

CEO & PRESIDENT

Title